

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | J.B. | 2825 | 8-15-00 |
| O.I.P.E. CLASSIFIER | | 49 | 8/17/00 |
| FORMALITY REVIEW | SK | 835 | 9/20/00 |
| RESPONSE FORMALITY REVIEW | NL | 553 | 11-24-00 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

| Claim | Date |
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| Final | |
| Original | |
| 1 | 8/17/00 |
| 2 | 8/17/00 |
| 3 | 8/17/00 |
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| Claim | Date |
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| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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